DO/EO BIBLIOGRAPHIC DATA ENTRY

SERIAL NUMBER: 09 / 890227	RECEIPT DATE: 07 / 27 / 01
IA NUMBER: PCT/ DE00 / 00191	IA FILING DATE: 01 / 21 / 00
FAMILY NAME: BOROWSKY	DELAY WAIVED (Y/N): N
GIVEN NAME: HANS-DIETER	DEMAND RECEIVED (Y/N): N
PRIORITY CLAIMED (Y/N): Y	PRIORITY DATE: 01 / 27 / 99
NO BASIC FEE (Y/N): N	US DESIGNATED ONLY (Y/N): N
ATTORNEY DOCKET NUMBER: HHI	033 COUNTRY:
CORRESPONDENCE NAME/ADDRESS: C	ISTOMER NUMBER: 000000 TELEPHONE 6172277400
	FAX

NAME:

ANTHONY A LAURENTANO

LAHIVE & COCKFIELD

STREET: 28 STATE STREET

CITY: BOSTON

STATE/COUNTRY: MA ZIP: 02109

EMAIL:

APPLICATION TITLES:

AUDITORY TREATMENT DEVICE

TAB TO LAST POSITION, PUSH SEND